## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000000292

FILED Apr 08, 2009 Secretary of State

Entity Name: MARBELLA AT SPANISH WELLS II CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 3050 HORSESHOE DRIVE NORTH 12650 WHITEHALL DR SUITE 275 FORT MYERS, FL 33907 US NAPLES, FL 34104 New Mailing Address: **Current Mailing Address:** C/O BENSON'S, INC 3050 HORSESHOE DRIVE NORTH SUITE 275 12650 WHITEHÁLL DR NAPLES, FL 34104 FORT MYERS, FL 33907 US FEI Number: 20-3214669 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENSON'S KT VANDALL, BONITA D 12650 WHITEHALL DR 3050 HORSESHOE DRIVE NORTH SUITE 275 US FORT MYERS, FL 33907 NAPLES, FL 34104 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: BONITA D. VANDALL 04/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition URICK, GIL Name: Name: 9150 SPANISH MOSS WAY #721 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: KNOUSE, LOU Name: KNOUSE, LOUIS Address: 9150 SPANISH MOSS WAY #722 Address: 9150 SPANISH MOSS WAY #722 City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip: BONITA SPRINGS, FL 34135 US Title: DST () Delete Title: () Change () Addition HENSTEIN, ROBERT Name: Name: 28101 MANDOLIN COURT # 111 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GIL URICK **PRES** 04/08/2009